

# FOSTERING HEALTHY ADOLESCENTS AND YOUNG ADULTS

Between the ages of 10 and 20, youth make transitions through early, middle and late stages of adolescence, and each stage brings with it a new set of physical, mental and emotional challenges. While most adolescents successfully navigate this transition, some adolescents take unhealthy or dangerous risks and initiate habits that may lead to chronic illnesses in adulthood.

Adolescents' resiliency is influenced by the settings in which they live; their connections to family and friends; and support from community institutions. National surveys of thousands of young people reveal that the more protective factors or assets a young person possesses, then the more likely he or she is to do well in school and less likely to engage in risk-taking behaviors.

The philosophy and approach to policies and programs that incorporate the building of developmental assets and resiliency among youth is called the youth development approach. The underlying philosophy of youth development is holistic, preventive and positive, focusing on the development of assets and competencies in youth as the best means for fostering health and well-being and for avoiding negative choices and outcomes. Youth who succeed in the developmental tasks of adolescence lay the foundation for health and well-being in their adult lives.

## TENNESSEE DATA



### Population

- In 2004, the population of adolescents, ages 10-19, was 818,681, or 14% of Tennessee's total population.
- In 2004, 23% of adolescents, ages 10-19, were of minority racial/ethnic descent, compared to 22% in 1994.
- The population of adolescents as a percent of the total population is projected to stay relatively stable in Tennessee through 2010.

### Economic Status

- In 2000, 71,323 adolescents and young adults (about 15.5% of the population of youth ages 12-17) lived in families with income below the federal poverty level.
- As of 2002, 25% of all 18-24 year old Tennesseans lived in poverty. That compares to 20% nationally.

### Education

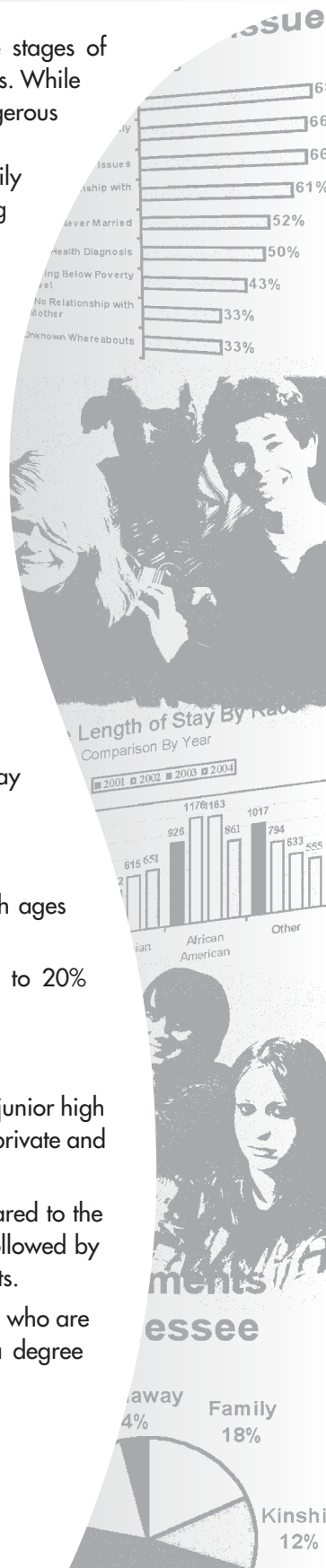
- During the 2002-2003 school year there were 151,499 adolescents enrolled in middle or junior high schools (7th and 8th grades), and 271,677 young people enrolled in high school (public, private and alternative schools).
- Tennessee ranks 46th in the country with a high school graduation rate of 60% as compared to the rate of 71% for the nation. Hispanic students have the lowest graduation rate of 38%, followed by African-American students with a rate of 44%, and finally a rate of 64% for white students.
- Seventeen percent of Tennessee's young adults ages 18-24 are disconnected young adults, who are defined as young persons either not enrolled in school, not working or do not have a degree beyond high school. Nationally, 15% of America's youth are disconnected young adults.

## BEST PRACTICES



### Parents, Peers and Other Adults

- Parent-child relationships are vital to adolescent development and well-being.
- Peer influences are important and can be positive.



- Siblings, teachers and other adults and mentors can provide important support.

### Programs

- Young people engaged in programs that build relationships and provide structured activities participate in fewer behaviors that place their health at risk.
- Successful programs target specifically desired outcomes, start early and maintain the effort and implement their services with fidelity to research-tested strategies.
- A positive approach is more likely to engage adolescents and help them to realize their potential and avoid negative influences.

### Community Planning

Addressing the health needs of adolescents is best done within the context of community collaboration and planning. These steps assume community and youth involvement.

- Conduct a community-based assessment and planning process to be sure that the community is addressing the adolescent issues that are most appropriate and pressing.
- Decide whether the issue will be addressed directly, or whether the conditions that make it possible will be changed.
- Locate practices or interventions that have successfully addressed the issue in the way the community wants it addressed.
- Determine what elements of a promising intervention will work in the community, and which ones need to be changed.
- Implement the intervention, making on-going adjustments as needed.
- Evaluate the work and results regularly, understanding that no matter how well any intervention works, it can always be improved.

### Websites

Center for Adolescent Health and Development  
[www.allaboutkids.umn.edu/cfahad](http://www.allaboutkids.umn.edu/cfahad)

National Adolescent Health Information Center  
<http://nahic.ucsf.edu/>

National Initiative to Improve Adolescent Health  
<http://www.cdc.gov/HealthyYouth/AdolescentHealth/NationalInitiative/index.htm>

National Youth Development Information Center  
<http://www.nydic.org/nydic/>

Search Institute  
[www.search-institute.org](http://www.search-institute.org)

Social Development Research Group (Hawkins & Catalano)  
<http://depts.washington.edu/sdrg/>

Youth Infusion  
<http://youthinfusion.com/WhatWeDo.html>

The Forum for Youth Investment  
<http://www.forumforyouthinvestment.org/>

